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## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 8748

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/849,979	05/21/2004 RULE	435	1646	PZ028P2C1

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/948,783 09/10/2001 ABN  
 which claims benefit of 60/231,846 09/11/2000  
 and is a CIP of 09/892,877 06/28/2001 ABN  
 which is a CON of 09/437,658 11/10/1999 ABN  
 which is a CIP of PCT/US99/09847 05/06/1999  
 which claims benefit of 60/085,093 05/12/1998  
 and claims benefit of 60/085,094 05/12/1998  
 and claims benefit of 60/085,105 05/12/1998  
 and claims benefit of 60/085,180 05/12/1998  
 and claims benefit of 60/085,927 05/18/1998  
 and claims benefit of 60/085,906 05/18/1998  
 and claims benefit of 60/085,920 05/18/1998  
 and claims benefit of 60/085,924 05/18/1998  
 and claims benefit of 60/085,922 05/18/1998  
 and claims benefit of 60/085,923 05/18/1998  
 and claims benefit of 60/085,921 05/18/1998  
 and claims benefit of 60/085,925 05/18/1998  
 and claims benefit of 60/085,928 05/18/1998

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

Foreign Priority claimed

☐ yes ☐ no35 USC 119 (a-d) conditions  
met☐ yes ☐ no ☐ Met after  
AllowanceSTATE OR  
COUNTRYSHEETS  
DRAWINGTOTAL  
CLAIMSINDEPENDENT  
CLAIMS

Verified and Acknowledged	Examiner's Signature	Initials	MD	8	24	4
<b>ADDRESS</b> 22195						
<b>TITLE</b> ANTIBODIES TO HHPEN62 POLYPEPTIDE						
<b>FILING FEE RECEIVED</b> 928	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees		
				<input type="checkbox"/> 1.16 Fees ( Filing )		
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4/13/07